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REMARKS

Claims 1 to 55 are pending in the application.

Claims 5, 26-51, 54, and 55 are canceled.

Claims 1, 4, 15, 17, 19, 21, 24, 25, 52, and 53 are currently amended.

Claims 1-4, 6-25, 52, and 53 would be all of the claims pending in the application if the instant amendment is entered.

Election/Restriction

Claims 26-51 are canceled as allegedly being drawn to a non-elected invention.

Claim Rejections - 35 U.S.C. § 112, Second Paragraph

Claim 4 is rejected under 35 U.S.C. § 112, second paragraph, as allegedly being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention. It was argued in the Office Action that the limitation "any other nerve injury between the peripheral nerve system and the central nerve system" renders claim 4 indefinite.

Claim 4 has been amended to delete the objected to phrase.

Claim Rejections - 35 U.S.C. § 103 – WO 99/01426

Claims 1-4, 9-25, 52, and 53 are rejected under 35 U.S.C. § 103(a) as allegedly being unpatentable over WO 99/01426 ('426). It was argued in the Office Action that the '426 publication teaches the MEK inhibitor N-cyclopropylmethoxy-3,4,5-trifluoro-2-(4-iodo-2-methyl-phenylamino)-benzamide, which Applicants elected in their response to the restriction requirement, is useful in treating proliferative diseases such as cancer. The Office Action noted that the '426 publication does not expressly teach the elected species is useful for treating chronic pain. However, it was alleged in the Office Action that it would have been obvious to one of ordinary skill in the art at the time the

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invention was made to employ the elected species in a method of treating chronic pain because cancer is always associated with chronic pain.

Applicants respectfully traverse the rejection because they believe that the skilled artisan would not have had a reasonable expectation of success for using a MEK inhibitor to treat chronic pain in view of the '426 publication for the reasons provided below.

Contrary to what was alleged, Applicants believe that cancer is not always associated with chronic pain. In support, Applicants enclose with this paper a copy of *Management of Cancer Symptoms: Pain, Depression, and Fatigue*. Summary, Evidence Report/Technology Assessment: Number 61. AHRQ Publication No. 02-E031, July 2002. Agency for Healthcare Research and Quality, Rockville, MD. In this report from the U.S. Department of Health and Human Services, the prevalence of cancer pain among cancer patients is characterized as being experienced by a majority of patients at some point during their course of treatment (page 2, second column). Applicants believe it may be inferred from the report that a minority of cancer patients do not experience cancer pain.

Further, Applicants believe that the skilled artisan would have known that many anti-cancer drugs are used to treat cancer *per se* such as by killing cancer cells, rather than to treat a symptom of cancer such as cancer pain. In support, Applicants point the Examiner to a Food and Drug Administration web page <http://www.fda.gov/cder/cancer/druglistframe.htm> and the links embedded therein, which list approved oncology drugs and their approved indications. Applicants believe that chronic pain is not recited as an approved indication in many of the entries for such drugs.

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Applicants believe that the skilled artisan would not have reasonably expected success treating chronic pain with the MEK inhibitors described in the '426 publication as being useful for treating cancer. Accordingly, Applicants believe that claims 1-4, 9-25, 52, and 53 are not obvious and are patentable under 35 U.S.C. § 103(a) in view of WO 99/01426.

Claim Rejections - 35 U.S.C. § 103 – WO 99/01421

Claims 1-4, 6-25, 52, and 53 are rejected under 35 U.S.C. § 103(a) as allegedly being unpatentable over WO 99/01421 ('421). It was argued in the Office Action that the '421 publication teaches 4-iodo-phenylamino benzamide compounds, including the elected species, as MEK inhibitors useful in treating diabetes, proliferative disorders such as cancer, and inflammation. The Office Action noted that the '421 publication does not expressly teach the elected species is useful for treating chronic pain. However, it was alleged in the Office Action that it would have been obvious to the skilled artisan to employ the elected species in a method of treating chronic pain because cancer is always associated with chronic pain.

Applicants respectfully traverse the rejection for reasons analogous to those provided above in response to the previous rejection. Accordingly, Applicants believe that claims 1-4, 9-25, 52, and 53 are not obvious and are patentable under 35 U.S.C. § 103(a) in view of WO 99/01421.

Claim Rejections - 35 U.S.C. § 103 – WO 99/01426 or WO 99/01421 in view of Ru-Rong Ji, et al., Nature Neuroscience, 1999;2(12):1114-1119

Claim 5 is rejected under 35 U.S.C. § 103(a) as allegedly being unpatentable over the '426 publication or the '421 publication, as applied above, in view of Ru-Rong Ji, et al., *Nature Neuroscience*, 1999;2(12):1114-1119. Claim 5 is canceled, rendering rejection of claim 5 moot.

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Conclusion

In view of the above amendments and remarks, Applicants believe that the rejections of claims 1 to 25, 52, and 53 are overcome. Applicants request reconsideration of claims 1-4, 6-25, 52, and 53.

Respectfully submitted,

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Management of Cancer Symptoms: Pain, Depression, and Fatigue.

Summary, Evidence Report/Technology Assessment: Number 61. AHRQ

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